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| Substitute for form 1449A/PTO | | | | Complete If Known | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | | Application Number | |
| | | | | Filing Date | |
| | | | | First Named Inventor | |
| | | | | Group Art Unit | |
| | | | | Examiner Name | |
| Sheet | 1 | of | 1 | Attorney Docket Number | |
| | | | | AFD658 | |

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| Examiner Signature | | | <div style="display: flex; justify-content: space-between;"> <i>Kamil Saeed</i> Date Considered <i>11/10/04</i> </div> |